

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

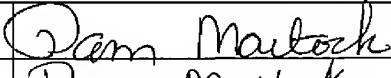
<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/697,682-Conf. #9817
	Filing Date	October 29, 2003
	First Named Inventor	Xing Su
	Art Unit	1743
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	21058/1206739-US1

I hereby revoke all previous powers of attorney given in the above-identified application.

 A Power of Attorney is submitted herewith.**OR** I hereby appoint the practitioners associated with the Customer Number:  Please change the correspondence address for the above-identified application to: The address associated with Customer Number: **OR** Firm or Individual Name Address City Country  State  Zip Telephone  Email 

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	<input type="text" value="Pam Matlock"/>		
Date	<input type="text" value="5-21-07"/>	Telephone	<input type="text" value="408-765-1144"/>

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of  forms are submitted.